

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

RECEIVED

2014 FEB 18 AM 10:36

Office Use Only
FESTIVAL CENTER

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

LEFLORE FOR CONGRESS

ADDRESS (number and street)

P.O. BOX 56

Check if different than previously reported. (ACC)

MOBILE

AL 36601-0056

2. FEC IDENTIFICATION NUMBER ▼

C00546366

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

X

NEW (N)

OR

AMENDED (A)

AL

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

X October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

X

Special (12S)

Election on

12 17 2013

in the State of

AL

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

X

Special (30S)

Election on

12 17 2013

in the State of

AL

5. Covering Period

11 28 2013

through

12 31 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

BURTON R LEFLORE

Signature of Treasurer

[Signature]

Date

01 31 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

Page 2

Write or Type Committee Name

LEFLORE FOR CONGRESS

Report Covering the Period:

From:

11 ' 28 ' 2013

To:

12 ' 31 ' 2014

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	8,781.10	21,362.66
(b) Total Contribution Refunds (from Line 20(d))00	.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	8,781.10	21,362.66
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	9,899.74	21,176.81
(b) Total Offsets to Operating Expenditures (from Line 14)00	.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	9,899.74	21,176.81
8. Cash on Hand at Close of Reporting Period (from Line 27)	1,857.8	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	3,295.42	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

LEGLORE FOR CONGRESS

Report Covering the Period:

From:

11 28 2013

To:

12 31 2013

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A)

, *8,781.10*

, *21,362.66*

(ii) Unitemized

, *00*

, *00*

(iii) TOTAL of contributions
from individuals

, *8,781.10*

, *21,362.66*

(b) Political Party Committees

, *00*

, *00*

(c) Other Political Committees
(such as PACs)

, *00*

, *00*

(d) The Candidate

, *00*

, *00*

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d)) ..

, *8,781.10*

, *21,362.66*

12. TRANSFERS FROM OTHER

AUTHORIZED COMMITTEES

, *00*

, *00*

13. LOANS:

(a) Made or Guaranteed by the
Candidate

, *00*

, *00*

(b) All Other Loans

, *00*

, *00*

(c) TOTAL LOANS
(add Lines 13(a) and (b))

, *00*

, *00*

14. OFFSETS TO OPERATING

EXPENDITURES
(Refunds, Rebates, etc.)

, *00*

, *00*

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

, *00*

, *00*

16. TOTAL RECEIPTS (add Lines

11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)

, *8,781.10*

, *21,362.66*

14031184104

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	9,899.74	21,176.88
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	.00	.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	.00	.00
(b) Of All Other Loans.....	.00	.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	.00	.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	.00	.00
(b) Political Party Committees.....	.00	.00
(c) Other Political Committees (such as PACs).....	.00	.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	.00	.00
21. OTHER DISBURSEMENTS.....	.00	.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	9,899.74	21,176.88

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1,304.42
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	8,781.10
25. SUBTOTAL (add Line 23 and Line 24).....	10,085.52
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	9,899.74
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	185.78

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE 7 OF 11	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LEFLORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. *Baldwin County Dem Committee*

Mailing Address

PO Box 1484

City

FAIRHOPE

State

AL

Zip Code

36532

FEC ID number of contributing
federal political committee.

C 00546366

Name of Employer

Occupation

Receipt For:

Primary

General

☒ Other (specify) *SPECIAL*

Election Cycle-to-Date

200.00

Date of Receipt

7 DEC 2013

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. *BAPTIST MINISTERS CONFERENCE, PRICHARD*

Mailing Address

PO Box 10146

City

PRICHARD

State

AL

Zip Code

36610-0146

FEC ID number of contributing
federal political committee.

C 00546366

Name of Employer

Occupation

Receipt For:

Primary

General

☒ Other (specify) *SPECIAL*

Election Cycle-to-Date

606.00

Date of Receipt

11 DEC 2013

Amount of Each Receipt this Period

606.00

Full Name (Last, First, Middle Initial)

C. *WILSON, COSSIE BERNICE*

Mailing Address

513 NEWPORT DRIVE, EAST

City

MOBILE

State

AL

Zip Code

36609

FEC ID number of contributing
federal political committee.

C 00546366

Name of Employer

Occupation

SELF

MINISTER / RETIRED

Receipt For:

Primary

General

☒ Other (specify) *SPECIAL*

Election Cycle-to-Date

40.00

Date of Receipt

7 DEC 2013

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional).....

846.00

TOTAL This Period (last page this line number only).....

846.00

846.00

14031184106

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE <u>2</u> OF <u>11</u>	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

LEFLORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. GRINE HILL MISSION

Mailing Address

PO BOX 144

City

URIAH

State

AL

Zip Code

36480

FEC ID number of contributing federal political committee.

C 00546366

Name of Employer

Occupation

NA

Receipt For:

Primary

General

☒ Other (specify) SPECIAL

Election Cycle-to-Date

100.00

Date of Receipt

15 DEC 2013

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. ENGLISH, RUFUS JR. or ANNE

Mailing Address

PO BOX 3104

City

DAPHNE

State

AL

Zip Code

36526

FEC ID number of contributing federal political committee.

C 00546366

Name of Employer

Occupation

SELF

Receipt For:

Primary

General

☒ Other (specify) SPECIAL

Election Cycle-to-Date

100.00

Date of Receipt

16 DEC 2013

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. GATEWOOD, DIGGS, SHARON

Mailing Address

3450 BAY FRONT ROAD

City

MOBILE

State

AL

Zip Code

36605-3660

FEC ID number of contributing federal political committee.

C 00546366

Name of Employer

Occupation

RETIRED

TEACHER

Receipt For:

Primary

General

☒ Other (specify) SPECIAL

Election Cycle-to-Date

25.00

Date of Receipt

16 DEC 2013

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

1071.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE <u>3</u> OF <u>11</u>	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)	<u>LEGIONE FOR CONGRESS</u>
-----------------------------	-----------------------------

Full Name (Last, First, Middle Initial) A. HAMILTON, WALTER		Date of Receipt <u>13 DEC 2013</u>
Mailing Address <u>7720 BEDFORD COURT</u>		
City <u>MOBILE</u>	State <u>AL</u>	Zip Code <u>36695</u>
FEC ID number of contributing federal political committee. <u>C 00546366</u>		Amount of Each Receipt this Period <u>500.00</u>
Name of Employer <u>TEAM HEALTH</u>	Occupation <u>PHYSICIAN</u>	
Receipt For: Primary <input type="checkbox"/> General <input type="checkbox"/> <input checked="" type="checkbox"/> Other (specify) <u>SPECIAL</u>	Election Cycle-to-Date <u>500.00</u>	

Full Name (Last, First, Middle Initial) B. COLLINS, DAMIAN		Date of Receipt <u>12 DEC 2013</u>
Mailing Address <u>5304 OAK BEND COURT</u>		
City <u>MOBILE</u>	State <u>AL</u>	Zip Code <u>36695</u>
FEC ID number of contributing federal political committee. <u>C 00546366</u>		Amount of Each Receipt this Period <u>500.00</u>
Name of Employer <u>INFIRMARY HEALTHCARE</u>	Occupation <u>PHYSICIAN</u>	
Receipt For: Primary <input type="checkbox"/> General <input type="checkbox"/> <input checked="" type="checkbox"/> Other (specify) <u>SPECIAL</u>	Election Cycle-to-Date <u>500.00</u>	

Full Name (Last, First, Middle Initial) C. BLOCK, LILY		Date of Receipt <u>4 DEC 2013</u>
Mailing Address <u>10725 HUNTERS CT, EAST</u>		
City <u>MOBILE</u>	State <u>AL</u>	Zip Code <u>36695</u>
FEC ID number of contributing federal political committee. <u>C 00546366</u>		Amount of Each Receipt this Period <u>200.00</u>
Name of Employer <u>SELF</u>	Occupation <u>REAL ESTATE AGENT</u>	
Receipt For: Primary <input type="checkbox"/> General <input type="checkbox"/> <input checked="" type="checkbox"/> Other (specify) <u>SPECIAL</u>	Election Cycle-to-Date <u>200.00</u>	

SUBTOTAL of Receipts This Page (optional).....	<u>1200.00</u>
TOTAL This Period (last page this line number only).....	<u>2271.00</u>

14031184108

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 4 OF 4

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

LEFLORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CHAPMAN, CORTAZ + PAULETTE

Mailing Address

PO BOX

City

CAUCKA SAW

State

AL

Zip Code

36611

FEC ID number of contributing
federal political committee.

C 00546366

Name of Employer

SELF

Occupation

DAY CARE OPERATOR

Receipt For:

Primary

General

☒ Other (specify) SPECIAL

Election Cycle-to-Date

130.00

Date of Receipt

15 DEC 2013

Amount of Each Receipt this Period

130.00

Full Name (Last, First, Middle Initial)

B. LEFLORE JANET

Mailing Address

2216 RUE DE LEROLE STREET

City

MOBILE

State

AL

Zip Code

36617

FEC ID number of contributing
federal political committee.

C 00546366

Name of Employer

RETIRED

Occupation

PROFESSOR / COLLEGE

Receipt For:

Primary

General

☒ Other (specify) SPECIAL

Election Cycle-to-Date

2000.00

Date of Receipt

21 DEC 2013

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. SCOTT, ERNEST

Mailing Address

6714 PHERIN WOODS CIRCLE

City

MOBILE

State

AL

Zip Code

36608

FEC ID number of contributing
federal political committee.

C 00546366

Name of Employer

Occupation

Receipt For:

Primary

General

☒ Other (specify) SPECIAL

Election Cycle-to-Date

150.00

Date of Receipt

13 DEC 2013

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

1280.00

TOTAL This Period (last page this line number only)

3551.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE <u>5</u> OF <u>11</u>	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

LEFLORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. QUINTA, Vincent or Mary

Mailing Address

5700 HERITAGE LANE

City

MOBILE (BON SECOUR), AL 36511

FEC ID number of contributing
federal political committee.

C 00546366

Name of Employer

Occupation

Receipt For:

Primary General

☒ Other (specify) SPECIAL

Election Cycle-to-Date

700.00

Date of Receipt

11 Dec 2013

Amount of Each Receipt this Period

700.00

Full Name (Last, First, Middle Initial)

B. DAVID G. GAIN, GEORGE

Mailing Address

1206 CECILIA STREET

City

MOBILE AL 36617

FEC ID number of contributing
federal political committee.

C 00546366

Name of Employer

Occupation

Receipt For:

Primary General

☒ Other (specify) SPECIAL

Election Cycle-to-Date

50.00

Date of Receipt

6 Dec 2013

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. RODGERS GROCERY 99

Mailing Address

2350 ST. STEPHENS ROAD

City

MOBILE, AL 36617

FEC ID number of contributing
federal political committee.

C 00546366

Name of Employer

Occupation

Receipt For:

Primary General

☒ Other (specify) SPECIAL

Election Cycle-to-Date

200.00

Date of Receipt

13 Dec 2013

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

450.00

4001.00

14031184110

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 6 OF 11	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)

LEFLORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. LEFLORE, JANET O.

Mailing Address

2216 RUE DE LEFLORE ST.

City

MOBILE

State

AL

Zip Code

36617

FEC ID number of contributing federal political committee.

C 00546366

Name of Employer

RETIRED

Occupation

COLLEGE PROFESSOR

Receipt For:

Primary

General

☒ Other (specify) SPECIAL

Election Cycle-to-Date

1000.00

Date of Receipt

14 DEC 2013

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. RODGERS BAR-B-Q

Mailing Address

2350 ST. STEPHENS ROAD

City

MOBILE

State

AL

Zip Code

36617

FEC ID number of contributing federal political committee.

C 00546366

Name of Employer

RESTAURANT OWNER

Occupation

RESTAURANT OWNER

Receipt For:

Primary

General

☒ Other (specify) SPECIAL

Election Cycle-to-Date

550.00

Date of Receipt

17 DEC 2013

Amount of Each Receipt this Period

IN-KIND

550.00

Full Name (Last, First, Middle Initial)

C. LEWIS, PATRICIA

Mailing Address

3713 HOLLY RIDGE CIRCLE

City

MOBILE

State

AL

Zip Code

36693

FEC ID number of contributing federal political committee.

C 00546366

Name of Employer

SELF

Occupation

ACCOUNTING

Receipt For:

Primary

General

☒ Other (specify) SPECIAL

Election Cycle-to-Date

375.10

Date of Receipt

DEC 2013

Amount of Each Receipt this Period

IN-KIND

375.10

SUBTOTAL of Receipts This Page (optional)

1925.10

TOTAL This Period (last page this line number only)

5926.10

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE <u>7</u> OF	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

LEFLORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. *WHITE CHARLES*
Mailing Address *DR ML KING JR AVENUE*
City *MOBILE* State *AL* Zip Code *36603*

Date of Receipt

4 DEC 2013

FEC ID number of contributing federal political committee.

C 00546366

Amount of Each Receipt this Period

Name of Employer

FRANKLIN HEALTH CENTERS HEALTH CARE DIRECTOR

Receipt For:

Primary ☐ General ☐
☒ Other (specify) *SPECIAL*

Election Cycle-to-Date

250.00

250.00

Full Name (Last, First, Middle Initial)

B. *KEOUGH, DAVID*
Mailing Address *437 N. COLLEGE STREET*
City *CARLISLE* State *PA* Zip Code *17013*

Date of Receipt

2 DEC 2013

FEC ID number of contributing federal political committee.

C 00546366

Amount of Each Receipt this Period

Name of Employer

NA

Receipt For:

Primary ☐ General ☐
☒ Other (specify) *SPECIAL*

Election Cycle-to-Date

10.00

10.00

Full Name (Last, First, Middle Initial)

C. *SCHNEIDER, FLO*
Mailing Address *724 S. MOBILE ST*
City *FAIRHOPE* State *AL* Zip Code *36532*

Date of Receipt

3 DEC 2013

FEC ID number of contributing federal political committee.

C 00546366

Amount of Each Receipt this Period

Name of Employer

RETIRED

Receipt For:

Primary ☐ General ☐
☒ Other (specify) *SPECIAL*

Election Cycle-to-Date

25.00

25.00

SUBTOTAL of Receipts This Page (optional).....

285.00

TOTAL This Period (last page this line number only).....

6211.10

14031184112

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 11

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

LEFLORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. TIFFORI, MICHAEL E

Mailing Address

563 MARSH DRIVE

City

FAIRHOPE

State

AL

Zip Code

36532

FEC ID number of contributing
federal political committee.

C 00546366

Name of Employer

N/A

Occupation

N/A

Receipt For:

Primary

General

☒ Other (specify) SPECIAL

Election Cycle-to-Date

25.00

Date of Receipt

3 DEC 2013

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. HINTON, JANET

Mailing Address

373 FRANCHILLA CIRCLE

City

FAIRHOPE

State

AL

Zip Code

36532

FEC ID number of contributing
federal political committee.

C 00546366

Name of Employer

N/A

Occupation

N/A

Receipt For:

Primary

General

☒ Other (specify) SPECIAL

Election Cycle-to-Date

100.00

Date of Receipt

3 DEC 2013

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. EASTERN SHORE DEMOCRATS

Mailing Address

100 BOX 73

City

FAIRHOPE

State

AL

Zip Code

36533

FEC ID number of contributing
federal political committee.

C 00546366

Name of Employer

N/A

Occupation

Receipt For:

Primary

General

☒ Other (specify) SPECIAL

Election Cycle-to-Date

250.00

Date of Receipt

3 DEC 2013

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

375.00

TOTAL This Period (last page this line number only)

6586.10

14031184113

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE <u>9</u> OF <u>11</u>	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

LEFLORE FOR CONGRESS

A. Full Name (Last, First, Middle Initial) MCNEIL MELVIN

Mailing Address

City MOBILE State AL Zip Code

FEC ID number of contributing federal political committee. C 00546366

Name of Employer NA Occupation NA

Receipt For:
☐ Primary ☐ General
☒ Other (specify) SPECIAL

Election Cycle-to-Date 130.00

Date of Receipt

M M / D D / Y Y Y Y

3 DEC 2013

Amount of Each Receipt this Period

130.00

B. Full Name (Last, First, Middle Initial) GATES WILLIAM R.

Mailing Address 2207 CLINTON STREET

City MOBILE State AL Zip Code 36617

FEC ID number of contributing federal political committee. C 00546366

Name of Employer Occupation RETIRED

Receipt For:
☐ Primary ☐ General
☒ Other (specify) SPECIAL

Election Cycle-to-Date 100.00

Date of Receipt

M M / D D / Y Y Y Y

02 DEC 2013

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial) BLACKS IN GOVERNMENT

Mailing Address 524 So. Union STREET

City Montgomery State AL Zip Code 36106

FEC ID number of contributing federal political committee. C 00546366

Name of Employer NA Occupation NA

Receipt For:
☐ Primary ☐ General
☒ Other (specify) SPECIAL

Election Cycle-to-Date 1000.00

Date of Receipt

M M / D D / Y Y Y Y

02 DEC 2013

Amount of Each Receipt this Period

1,000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1230.00
7816.10

14031184114

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE <u>10</u> OF	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)

LETTERS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. *BALL CLARENCE M*

Mailing Address

1 SOUTHERN WAY

City

MOBILE

State

AL

Zip Code

36619

FEC ID number of contributing federal political committee.

C 00546366

Name of Employer

HEALTH CARE HEALTH CENTER DIRECTOR

Occupation

Receipt For:

Primary

General

☒ Other (specify) *SPECIAL*

Election Cycle-to-Date

500.00

Date of Receipt

6 DEC 2013

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. *JACKSON YVETTE*

Mailing Address

8360 RADCLIFF ROAD

City

SARASOTA

State

FL

Zip Code

36671

FEC ID number of contributing federal political committee.

C 00546366

Name of Employer

N/A

Occupation

N/A

Receipt For:

Primary

General

☒ Other (specify) *SPECIAL*

Election Cycle-to-Date

50.00

Date of Receipt

8 DEC 2013

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. *NICHOLSON JAMES*

Mailing Address

9470 US Hwy 90

City

DAPHNE

State

AL

Zip Code

36526

FEC ID number of contributing federal political committee.

C 00546366

Name of Employer

N/A

Occupation

N/A

Receipt For:

Primary

General

☒ Other (specify) *SPECIAL*

Election Cycle-to-Date

100.00

Date of Receipt

8 DEC 2013

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

8466.10

14031184115

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE <u>10</u> OF	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

LEFLORE FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) <u>ADAMS JOHN W JR</u></p> <p>Mailing Address <u>PO BOX 988</u></p> <p>City <u>MOBILE</u> State <u>AL</u> Zip Code <u>36601</u></p> <p>FEC ID number of contributing federal political committee. <u>C 00546366</u></p> <p>Name of Employer <u>SELF EMPLOYED</u> Occupation <u>LAWYER</u></p> <p>Receipt For: Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <u>SPECIAL</u> Election Cycle-to-Date <u>150.00</u></p>		<p>Date of Receipt <u>2 DEC 2013</u></p> <p><u>150.00</u></p> <p>Amount of Each Receipt this Period <u>150.00</u></p>
<p>B. Full Name (Last, First, Middle Initial) <u>GLEASON, NANCY J</u></p> <p>Mailing Address <u>PO BOX 98568</u></p> <p>City <u>SEATTLE</u> State <u>WA</u> Zip Code <u>98198</u></p> <p>FEC ID number of contributing federal political committee. <u>C 00546366</u></p> <p>Name of Employer Occupation</p> <p>Receipt For: Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <u>SPECIAL</u> Election Cycle-to-Date</p>		<p>Date of Receipt <u>1 DEC 2013</u></p> <p>Amount of Each Receipt this Period <u>20.00</u></p>
<p>C. Full Name (Last, First, Middle Initial) <u>WILLIAMS, RENEE H</u></p> <p>Mailing Address <u>12 N. JULIA STREET</u></p> <p>City <u>MOBILE</u> State <u>AL</u> Zip Code <u>36604</u></p> <p>FEC ID number of contributing federal political committee. <u>C 00546366</u></p> <p>Name of Employer <u>NA</u> Occupation</p> <p>Receipt For: Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <u>SPECIAL</u> Election Cycle-to-Date <u>25.00</u></p>		<p>Date of Receipt <u>2 DEC 2013</u></p> <p>Amount of Each Receipt this Period <u>25.00</u></p>
<p>SUBTOTAL of Receipts This Page (optional).....</p>		<u>195.00</u>
<p>TOTAL This Period (last page this line number only).....</p>		<u>8661.10</u>

SCHEDULE A (FEC Form 3)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 11

11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (in Full)

LEFLORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

MITCHELL, BARBARA Y

Mailing Address

520 CRITERION ST.

City

MOBILE

State

AL

Zip Code

36610

FEC ID number of contributing
federal political committee.

C 00 546 366

Name of Employer

SELF-EMPLOYED

Occupation

MINISTER

Receipt For:

Primary

General

X Other (specify) SPECIAL

Station Cycle-to-Date

, 20.00 . 00

Date of Receipt

02 DEC 2013

Amount of Each Receipt this Period

, 20.00 . 00

Full Name (Last, First, Middle Initial)

MORRIS, MARY B

Mailing Address

507 PATTON AVENUE

City

MOBILE

State

AL

Zip Code

36605

FEC ID number of contributing
federal political committee.

C 00 546 366

Name of Employer

SELF-EMPLOYED

Occupation

COSMETOLOGY

Receipt For:

Primary

General

X Other (specify) SPECIAL

Station Cycle-to-Date

, 100.00 . 00

Date of Receipt

10 DEC 2013

Amount of Each Receipt this Period

, 100.00 . 00

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C 00 546 366

Name of Employer

Occupation

Receipt For:

Primary

General

X Other (specify) SPECIAL

Station Cycle-to-Date

, 110.00 . 00

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

, 110.00 . 00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

, 110.00 . 00

, 8781.10 . 00

14031184117

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 24

☒ 17 18 19a 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

LEFLORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A.

ABC SIGNS

Date of Disbursement

Mailing Address

5851 LA RUE STENGER ROAD

12/14/2013

City

THEODORE AL 36582

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement

CAMPAIGN SIGNS

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Disbursement For:

Primary

General

Senate

☒ Other (specify)

SPECIAL

President

State:

District:

AL 01

Full Name (Last, First, Middle Initial)

B.

LOWES

Date of Disbursement

Mailing Address

751 EAST I-65 SERVICE ROAD

12/09/2013

City

MOBILE AL 36606

Amount of Each Disbursement this Period

77.97

Purpose of Disbursement

LUMBER FOR SIGNS

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Disbursement For:

Primary

General

Senate

☒ Other (specify)

SPECIAL

President

State:

District:

AL 01

Full Name (Last, First, Middle Initial)

C.

DRAGON CITY BURRET

Date of Disbursement

Mailing Address

28616 US HIGHWAY 98

12/03/2013

City

DAPHNE AL 36526

Amount of Each Disbursement this Period

38.69

Purpose of Disbursement

LUNCH FOR CAMPAIGN WORKERS

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Disbursement For:

Primary

General

Senate

☒ Other (specify)

SPECIAL

President

State:

District:

AL 01

SUBTOTAL of Disbursements This Page (optional)

616.66

TOTAL This Period (last page this line number only)

616.66

14031184118

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 2 OF 24

☒ 17 18 19a 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

LEFLORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. TEXACO GAS

Date of Disbursement

Mailing Address

12/12/2013

City MOBILE State AL Zip Code

Amount of Each Disbursement this Period

50.00

Purpose of Disbursement

GAS FOR CANDIDATE

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Disbursement For:

Primary

General

☒ Other (specify)

SPECIAL

State: AL District: 01

Full Name (Last, First, Middle Initial)

B. DELCHAMPS PRINTING

Date of Disbursement

Mailing Address

310 ST MICHAEL STREET

13 Nov 2013

City MOBILE State AL Zip Code 36602

Amount of Each Disbursement this Period

Purpose of Disbursement

CAMPAIGN LITERATURE

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Disbursement For:

Primary

General

☒ Other (specify)

SPECIAL

State: AL District: 01

Full Name (Last, First, Middle Initial)

C. BROAD STREET CHEVRON

Date of Disbursement

Mailing Address

1167 SOUTH BROAD STREET

13 Dec 2013

City MOBILE State AL Zip Code 36603

Amount of Each Disbursement this Period

Purpose of Disbursement

GAS FOR CANDIDATE

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Disbursement For:

Primary

General

☒ Other (specify)

SPECIAL

State: AL District: 01

SUBTOTAL of Disbursements This Page (optional).....

486.10

TOTAL This Period (last page this line number only).....

1102.76

14031184119

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE 3 OF 24	
<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (in Full)

LEFLORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A.

NORWOOD BP

Date of Disbursement

Mailing Address

226 BS Highway 31

14 Dec 2013

City

FLOMONTON AL

State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

GAS FOR CAMPAIGN WORKERS

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Disbursement For:

Primary

General

☒ Other (specify)

SPECIAL

State:

AL

District:

01

94.00

Full Name (Last, First, Middle Initial)

B.

CLARKS # 15

Date of Disbursement

Mailing Address

2272 ST STEPHENS ROAD

8 Dec 2013

City

MOBILE, AL

State Zip Code

36617

Amount of Each Disbursement this Period

Purpose of Disbursement

Gas for CANDIDATE

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Disbursement For:

Primary

General

☒ Other (specify)

SPECIAL

State:

AL

District:

01

40.00

Full Name (Last, First, Middle Initial)

C.

Longhorn's Restaurant

Date of Disbursement

Mailing Address

6870 U.S Highway 90

8 Dec 2013

City

DAPHNE, AL

State Zip Code

36526

Amount of Each Disbursement this Period

Purpose of Disbursement

Dinner for CAMPAIGN WORKERS

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Disbursement For:

Primary

General

☒ Other (specify)

SPECIAL

State:

AL

District:

01

73.38

SUBTOTAL of Disbursements This Page (optional).....

207.38

TOTAL This Period (last page this line number only).....

1310.14

14031184120

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 4 OF 25
☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

LEFLORE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CLARKS # 15		Date of Disbursement 3 DEC 2013
Mailing Address 2272 ST. STEPHENS ROAD		Amount of Each Disbursement this Period 20.00
City MOBILE	State AL	
Zip Code 36617		
Purpose of Disbursement Gas for Campaign Workers Car		
Candidate Name BURTON R. LEFLORE		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: Primary <input checked="" type="checkbox"/> Other (specify) SPECIAL	
State: AL District: 01		

Full Name (Last, First, Middle Initial) B. U.S. POST OFFICE		Date of Disbursement 5 DEC 2013
Mailing Address ST. JOSEPH STREET		Amount of Each Disbursement this Period 101.20
City MOBILE	State AL	
Zip Code 36601-2001		
Purpose of Disbursement POSTAGE FOR HUSBANDS		
Candidate Name BURTON R. LEFLORE		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: Primary <input checked="" type="checkbox"/> Other (specify) SPECIAL	
State: AL District: 01		

Full Name (Last, First, Middle Initial) C. Handy Man's Railroad Salvage Inc		Date of Disbursement 3 DEC 2013
Mailing Address 70 ADAMS STREET		Amount of Each Disbursement this Period 112.07
City MOBILE	State AL	
Zip Code 36602-4025		
Purpose of Disbursement LUMBER FOR CAMPAIGN SIGNS		
Candidate Name BURTON R. LEFLORE		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: Primary <input checked="" type="checkbox"/> Other (specify) SPECIAL	
State: AL District: 01		

SUBTOTAL of Disbursements This Page (optional).....

233.27

TOTAL This Period (last page this line number only).....

1543.41

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 3 OF 24

☒ 17 ☐ 18 ☐ 19a ☐ 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

LEFLORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DEL CHAMPS PRINTING

Mailing Address

310 St. Michael Street

City

MOBILE

State

AL

Zip Code

36602

Purpose of Disbursement

Campaign Literature

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Senate

President

Disbursement For:

Primary

General

☒ Other (specify)

SPECIAL

State:

AL

District:

01

Full Name (Last, First, Middle Initial)

B. GIBBS, KATHY

Mailing Address

City

MOBILE

State

AL

Zip Code

36617

Purpose of Disbursement

TELEPHONE FOR HEADQUARTERS

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Senate

President

Disbursement For:

Primary

General

☒ Other (specify)

SPECIAL

State:

AL

District:

01

Full Name (Last, First, Middle Initial)

C. ABC SIGNS

Mailing Address

5851 ADRIAN SEWELL ROAD

City

THEODORE

State

AL

Zip Code

36582

Purpose of Disbursement

CAMPAIGN SIGNS

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Senate

President

Disbursement For:

Primary

General

☒ Other (specify)

SPECIAL

State:

AL

District:

01

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

Date of Disbursement

4 DEC 2013

Amount of Each Disbursement this Period

500.00

Date of Disbursement

4 DEC 2013

Amount of Each Disbursement this Period

120.00

Date of Disbursement

11 DEC 2013

Amount of Each Disbursement this Period

500.00

1120.00

2663.41

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE **6** OF **24**

☒ 17 ☐ 18 ☐ 19a ☐ 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

LEFLORE FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) DAVIS, SANFORD</p>		<p>Date of Disbursement 12 DEC 2013</p>	
<p>Mailing Address 2251 ROBERTA DRIVE</p>		<p>Amount of Each Disbursement this Period 250.00</p>	
<p>City MOBILE</p>	<p>State AL</p>	<p>Zip Code 36617</p>	
<p>Purpose of Disbursement Campaign Manager</p>		<p>Category/Type</p>	
<p>Candidate Name BURTON R. LEFLORE</p>			
<p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>		<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) SPECIAL</p>	
<p>State: AL District: 01</p>			
<p>B. Full Name (Last, First, Middle Initial) ABC Signs</p>		<p>Date of Disbursement 13 DEC 2013</p>	
<p>Mailing Address 5851 LORUS STEVEN ROAD</p>		<p>Amount of Each Disbursement this Period 500.00</p>	
<p>City THEODORE</p>	<p>State AL</p>	<p>Zip Code 36582</p>	
<p>Purpose of Disbursement Campaign Signs</p>		<p>Category/Type</p>	
<p>Candidate Name BURTON R. LEFLORE</p>			
<p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>		<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) SPECIAL</p>	
<p>State: AL District: 01</p>			
<p>C. Full Name (Last, First, Middle Initial) Rodgers Inc B-Que</p>		<p>Date of Disbursement 13 DEC 2013</p>	
<p>Mailing Address 2370 ST. STEPHENS ROAD</p>		<p>Amount of Each Disbursement this Period 19.78</p>	
<p>City MOBILE</p>	<p>State AL</p>	<p>Zip Code 36617</p>	
<p>Purpose of Disbursement LUNCH FOR CAMPAIGN WORKERS</p>		<p>Category/Type</p>	
<p>Candidate Name BURTON R. LEFLORE</p>			
<p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>		<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) SPECIAL</p>	
<p>State: AL District: 01</p>			
<p>SUBTOTAL of Disbursements This Page (optional).....</p>			
<p>TOTAL This Period (last page this line number only).....</p>			

769.78
3433.19

14031184123

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 24

☒ 17 ☐ 18 ☐ 19a ☐ 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

LEFLORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Wendy's

Mailing Address

939 GOVERNMENT STREET

City

MOBILE AL

State

Zip Code

36604

Purpose of Disbursement

LUNCH FOR CAMPAIGN WORKERS

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Senate

President

Disbursement For:

Primary

General

☒ Other (specify)

SPECIAL

State:

AL District: 01

Date of Disbursement

5 Dec 2013

Amount of Each Disbursement this Period

31.15

Full Name (Last, First, Middle Initial)

B. Ann D VIE

Mailing Address

901 MT + CATHERINE ST.

City

MOBILE AL

State

Zip Code

36604

Purpose of Disbursement

BEVERAGES FOR CAMPAIGN HEADQUARTERS

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Senate

President

Disbursement For:

Primary

General

☒ Other (specify)

SPECIAL

State:

AL District: 01

Date of Disbursement

14 Dec 2013

Amount of Each Disbursement this Period

25.45

Full Name (Last, First, Middle Initial)

C. Rent-A-Center

Mailing Address

410 W. CRAFT Highway

City

CAICKASAW AL

State

Zip Code

36661

Purpose of Disbursement

TELEVISION FOR HEADQUARTERS (RENTAL)

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Senate

President

Disbursement For:

Primary

General

☒ Other (specify)

SPECIAL

State:

AL District: 01

Date of Disbursement

17 Dec 2013

Amount of Each Disbursement this Period

36.40

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

93.00
3526.19

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

LEFLORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A.

CRICKET SERVICE STATION

Date of Disbursement

Mailing Address

1230 Government Street

16 Dec 2013

City

Mobile

State

AL

Zip Code

36606

Amount of Each Disbursement this Period

Purpose of Disbursement

Gas for Candidate

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Senate

President

Disbursement For:

Primary

General

☒ Other (specify)

SPECIAL

State:

AL

District:

01

100.00

Full Name (Last, First, Middle Initial)

B.

CLARK'S #15

Date of Disbursement

Mailing Address

2222 ST. STEPHENS ROAD

16 Dec 2013

City

Mobile

State

AL

Zip Code

36617

Amount of Each Disbursement this Period

Purpose of Disbursement

Gas for Campaign Work

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Senate

President

Disbursement For:

Primary

General

☒ Other (specify)

SPECIAL

State:

AL

District:

01

20.00

Full Name (Last, First, Middle Initial)

C.

FED - EV

Date of Disbursement

Mailing Address

840 LAKE SIDE DRIVE

16 Dec 2013

City

MOBILE

State

AL

Zip Code

36693

Amount of Each Disbursement this Period

Purpose of Disbursement

PACKAGE DELIVERY TO FEC

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Senate

President

Disbursement For:

Primary

General

☒ Other (specify)

SPECIAL

State:

AL

District:

01

57.70

SUBTOTAL of Disbursements This Page (optional).....

177.20

TOTAL This Period (last page this line number only).....

3709.89

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (to Full)

LEFLORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ABC SIGNS

Mailing Address

5851 LA RUE STEINER ROAD

City

THEODORE, AL State Zip Code 36582

Purpose of Disbursement

Campaign Signs

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☒ Other (specify) SPECIAL

State:

AL District: 01

Date of Disbursement

4 DEC 2013

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. DECCAMPS PRINTING

Mailing Address

310 St. Michael Street

City

MOBILE, AL State Zip Code 36602

Purpose of Disbursement

Campaign literature

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☒ Other (specify) SPECIAL

State:

AL District: 01

Date of Disbursement

4 DEC 2013

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. U.S. POSTAL SERVICE

Mailing Address

St. Joseph St.

City

MOBILE, AL State Zip Code 36602-001

Purpose of Disbursement

Postage for Campaign Headquarters

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☒ Other (specify) SPECIAL

State:

AL District: 01

Date of Disbursement

14 DEC 2013

Amount of Each Disbursement this Period

64.40

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1064.40

4768.29

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LEFLORE FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) <i>GRITTA SANCHE STRAIN</i></p>		<p>Date of Disbursement <i>16 DEC 2013</i></p>	
<p>Mailing Address <i>1250 Government Street</i></p>		<p>Amount of Each Disbursement this Period <i>74.00</i></p>	
<p>City <i>Mobile</i> State <i>AL</i> Zip Code <i>36601</i></p>			
<p>Purpose of Disbursement <i>Exp for Campaign North Phoenix</i></p>			
<p>Candidate Name <i>BURTON R. LEFLORE</i></p>		<p>Category/ Type <i>Exp.</i></p>	
<p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>		<p>Disbursement For: Primary General <input checked="" type="checkbox"/> Other (specify) <i>SPECIAL</i></p>	
<p>State: <i>AL</i> District: <i>01</i></p>			
<p>B. Full Name (Last, First, Middle Initial) <i>Party City</i></p>		<p>Date of Disbursement <i>17 Dec 2013</i></p>	
<p>Mailing Address <i>300 East Azalea Road</i></p>		<p>Amount of Each Disbursement this Period <i>16.50</i></p>	
<p>City <i>Mobile</i> State <i>AL</i> Zip Code <i>36609</i></p>			
<p>Purpose of Disbursement <i>Supplies for Watch Party</i></p>			
<p>Candidate Name <i>BURTON R. LEFLORE</i></p>		<p>Category/ Type</p>	
<p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>		<p>Disbursement For: Primary General <input checked="" type="checkbox"/> Other (specify) <i>SPECIAL</i></p>	
<p>State: <i>AL</i> District: <i>01</i></p>			
<p>C. Full Name (Last, First, Middle Initial) <i>Sam's Club</i></p>		<p>Date of Disbursement <i>17 Dec 2013</i></p>	
<p>Mailing Address <i>Airport Blvd</i></p>		<p>Amount of Each Disbursement this Period <i>65.24</i></p>	
<p>City <i>Mobile</i> State <i>AL</i> Zip Code <i>36606</i></p>			
<p>Purpose of Disbursement <i>Food for Watch Party</i></p>			
<p>Candidate Name <i>BURTON R. LEFLORE</i></p>		<p>Category/ Type</p>	
<p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>		<p>Disbursement For: Primary General <input checked="" type="checkbox"/> Other (specify) <i>SPECIAL</i></p>	
<p>State: <i>AL</i> District: <i>01</i></p>			
<p>SUBTOTAL of Disbursements This Page (optional).....</p>		<p><i>155.74</i></p>	
<p>TOTAL This Period (last page this line number only).....</p>		<p><i>4924.03</i></p>	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LEFLORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A.

Subway Sandwich Deli

Mailing Address

Government @ Agalea Road

City

Mobile

State

AL

Zip Code

36609

Purpose of Disbursement

Conc for Poll Watchers/Campaigners

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Senate

President

Disbursement For:

Primary

General

☒ Other (specify)

SPECIAL

State:

AL

District:

01

Date of Disbursement

17 DEC 2013

Amount of Each Disbursement this Period

70.38

Full Name (Last, First, Middle Initial)

B.

Logan's Roadhouse

Mailing Address

AIRPORT BLVD

City

MOBILE

State

AL

Zip Code

36606

Purpose of Disbursement

Dinner for Campaign Workers

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Senate

President

Disbursement For:

Primary

General

☒ Other (specify)

SPECIAL

State:

AL

District:

01

Date of Disbursement

Dec 2013

Amount of Each Disbursement this Period

84.40

Full Name (Last, First, Middle Initial)

C.

Robert's Bar-B-Q

Mailing Address

1350 ST. STEPHENS ROAD

City

MOBILE

State

AL

Zip Code

36617

Purpose of Disbursement

Food for Watch Party

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Senate

President

Disbursement For:

Primary

General

☒ Other (specify)

SPECIAL

State:

AL

District:

01

Date of Disbursement

17 DEC 2013

Amount of Each Disbursement this Period

IN KIND

550.00

SUBTOTAL of Disbursements This Page (optional)

704.78

TOTAL This Period (last page this line number only)

5628.81

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

LEFLORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. LEWIS, PATRICIA A

Date of Disbursement

Mailing Address

3713 HOLLY RIDGE CIRCLE

20 DEC 2013

City

MOBILE

State

Zip Code

AL

36693

Amount of Each Disbursement this Period

Purpose of Disbursement

BOOKKEEPING

IN - KIND

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Disbursement For:

Primary

General

Senate

☒ Other (specify)

SPECIAL

President

State:

AL

District:

01

375.10

Full Name (Last, First, Middle Initial)

B. ODOMS, ANDREA T.

Date of Disbursement

Mailing Address

20 DEC 2013

City

State

Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

CANVASSING WORKER

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Disbursement For:

Primary

General

Senate

☒ Other (specify)

SPECIAL

President

State:

AL

District:

01

200.00

Full Name (Last, First, Middle Initial)

C. WIMBERLY, WILLIAM

Date of Disbursement

Mailing Address

20 DEC 2013

City

State

Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

CANVASSING WORKER

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Disbursement For:

Primary

General

Senate

☒ Other (specify)

SPECIAL

President

State:

AL

District:

01

170.00

SUBTOTAL of Disbursements This Page (optional).....

745.10

TOTAL This Period (last page this line number only).....

6373.91

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LEFLORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. **SIMS RENE**

Date of Disbursement

Mailing Address

20 DEC 2012

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

CANVASSING WORKER

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☒ Other (specify) **SPECIAL**

State: **AL** District: **01**

50.00

Full Name (Last, First, Middle Initial)

B. **BRIDGES MILLIE**

Date of Disbursement

Mailing Address

20 DEC 2013

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

CANVASSING WORKER

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☒ Other (specify) **SPECIAL**

State: **AL** District: **01**

50.00

Full Name (Last, First, Middle Initial)

C. **JOHANSON, BURRIETIS**

Date of Disbursement

Mailing Address

20 DEC 2013

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

CANVASSING WORKER

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☒ Other (specify) **SPECIAL**

State: **AL** District: **01**

100.00

SUBTOTAL of Disbursements This Page (optional).....

200.00

TOTAL This Period (last page this line number only).....

6573.91

14031184130

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LEFLORE FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) <u>McDUFFIE, Marcus</u></p>		<p>Date of Disbursement <u>20 Dec 2013</u></p>	
<p>Mailing Address</p>		<p>Amount of Each Disbursement this Period <u>150.00</u></p>	
<p>City State Zip Code</p>			
<p>Purpose of Disbursement <u>CANVASSING WORKER</u></p>			
<p>Candidate Name <u>BURTON R. LEFLORE</u></p>		<p>Category/Type</p>	
<p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>		<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>SPECIAL</u></p>	
<p>State: <u>AL</u> District: <u>01</u></p>			
<p>B. Full Name (Last, First, Middle Initial) <u>DIA BAYS, ARTHUR</u></p>		<p>Date of Disbursement <u>20 Dec 2013</u></p>	
<p>Mailing Address</p>		<p>Amount of Each Disbursement this Period <u>100.00</u></p>	
<p>City State Zip Code</p>			
<p>Purpose of Disbursement <u>CANVASSING WORKER</u></p>			
<p>Candidate Name <u>BURTON R. LEFLORE</u></p>		<p>Category/Type</p>	
<p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>		<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>SPECIAL</u></p>	
<p>State: <u>AL</u> District: <u>01</u></p>			
<p>C. Full Name (Last, First, Middle Initial) <u>BAND, CHARLES</u></p>		<p>Date of Disbursement <u>20 Dec 2013</u></p>	
<p>Mailing Address</p>		<p>Amount of Each Disbursement this Period <u>140.00</u></p>	
<p>City State Zip Code</p>			
<p>Purpose of Disbursement <u>CANVASSING WORKER</u></p>			
<p>Candidate Name <u>BURTON R. LEFLORE</u></p>		<p>Category/Type</p>	
<p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>		<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>SPECIAL</u></p>	
<p>State: <u>AL</u> District: <u>01</u></p>			
<p>SUBTOTAL of Disbursements This Page (optional).....</p>		<p><u>390.00</u></p>	
<p>TOTAL This Period (last page this line number only).....</p>		<p><u>6963.91</u></p>	

14031184131

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

LEFLORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ALLEN, STELBONNIE

Date of Disbursement

Mailing Address

20 Dec 2013

City

State

Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☒ Other (specify) SPECIAL

State:

AL District: 01

150.00

Full Name (Last, First, Middle Initial)

B. MOORE, CORA

Date of Disbursement

Mailing Address

20 Dec 2013

City

State

Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☒ Other (specify) SPECIAL

State:

AL District: 01

150.00

Full Name (Last, First, Middle Initial)

C. McCALL, MICHELLE

Date of Disbursement

Mailing Address

20 Dec 2013

City

State

Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☒ Other (specify) SPECIAL

State:

AL District: 01

175.00

475.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

7438.91

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LEFLORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. GAMBLE, TERRENCE

Date of Disbursement

Mailing Address

20 Dec 2013

City

State

Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

CANVASSING WORKER

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Disbursement For:

Primary

General

☒ Other (specify)

SPECIAL

State:

AL

District:

01

175.00

Full Name (Last, First, Middle Initial)

B. NORWOOD, DELPHINE

Date of Disbursement

Mailing Address

20 Dec 2013

City

State

Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

CANVASSING WORKER

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Disbursement For:

Primary

General

☒ Other (specify)

SPECIAL

State:

AL

District:

01

50.00

Full Name (Last, First, Middle Initial)

C. DAVIS, SANFORD

Date of Disbursement

Mailing Address

2231 ROBERTA DRIVE

20 Dec 2013

City

State

Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

CAMPAIGN MANAGER

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Disbursement For:

Primary

General

☒ Other (specify)

SPECIAL

State:

AL

District:

01

50.00

SUBTOTAL of Disbursements This Page (optional)

275.00

TOTAL This Period (last page this line number only)

7713.91

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

LEFLORE FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Wagner, Barbara</p>		<p>Date of Disbursement 13 Dec 2013</p>	
<p>Mailing Address 263 FULTON STREET, So.</p>		<p>Amount of Each Disbursement this Period</p>	
<p>City Mobile, AL</p>	<p>State AL</p>	<p>Zip Code 36606</p>	<p>20.00</p>
<p>Purpose of Disbursement Gas for vehicle to pick up signs</p>			
<p>Candidate Name BURTON R. LEFLORE</p>			
<p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) SPECIAL</p>			
<p>State: AL District: 01</p>			
<p>B. Full Name (Last, First, Middle Initial) LIBBOS, KATHY</p>		<p>Date of Disbursement 20 Dec 2013</p>	
<p>Mailing Address</p>		<p>Amount of Each Disbursement this Period</p>	
<p>City MOBILE, AL</p>	<p>State AL</p>	<p>Zip Code 36617</p>	<p>250.00</p>
<p>Purpose of Disbursement CAMPAIGN MANAGER / OFFICE MGR</p>			
<p>Candidate Name BURTON R. LEFLORE</p>			
<p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) SPECIAL</p>			
<p>State: AL District: 01</p>			
<p>C. Full Name (Last, First, Middle Initial) RIVERS, DEBRA</p>		<p>Date of Disbursement 20 Dec 2013</p>	
<p>Mailing Address</p>		<p>Amount of Each Disbursement this Period</p>	
<p>City EIGHT MILE AL</p>	<p>State AL</p>	<p>Zip Code 36613</p>	<p>75.00</p>
<p>Purpose of Disbursement CANVASSING WORKER</p>			
<p>Candidate Name BURTON R. LEFLORE</p>			
<p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) SPECIAL</p>			
<p>State: AL District: 01</p>			
<p>SUBTOTAL of Disbursements This Page (optional).....</p>			<p>345.00</p>
<p>TOTAL This Period (last page this line number only).....</p>			<p>8058.91</p>

14031184134

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)
☒ 17 ☐ 18 ☐ 19a ☐ 19b
20a 20b 20c 21

PAGE 18 OF 24

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NAME OF COMMITTEE (in Full)

LEFLORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A.

CIBBS, RON

Date of Disbursement

20 Dec 2013

Mailing Address

City MOBILE State AL Zip Code 36617

Amount of Each Disbursement this Period

Purpose of Disbursement
DENVER SIGNS TO SITES

Candidate Name
BURTON R. LEFLORE

Category/
Type

Office Sought: ☒ House
Senate
President

Disbursement For:
Primary
☒ Other (specify) SPECIAL

State: AL District: 01

50.00

Full Name (Last, First, Middle Initial)

B.

TURK TECHNICAL SERVICES

Date of Disbursement

30 Dec 2013

Mailing Address

6417 DASHLIGHT LANE, NORTH

City MOBILE, AL State AL Zip Code 36695

Amount of Each Disbursement this Period

Purpose of Disbursement
WEB SITE

Candidate Name
BURTON R. LEFLORE

Category/
Type

Office Sought: ☒ House
Senate
President

Disbursement For:
Primary
☒ Other (specify) SPECIAL

State: AL District: 01

200.00

Full Name (Last, First, Middle Initial)

C.

LEFLORE, BURTON

Date of Disbursement

28 NOV 2013

Mailing Address

City MOBILE State AL Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement
TELEPHONE CAMPAIGN HEADQUARTERS

Candidate Name
BURTON R. LEFLORE

Category/
Type

Office Sought: ☒ House
Senate
President

Disbursement For:
Primary
☒ Other (specify) SPECIAL

State: AL District: 01

405.00

SUBTOTAL of Disbursements This Page (optional).....

655.00

TOTAL This Period (last page this line number only).....

8713.91

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

LEFLORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. BURGER MASTER RESTAURANT

Mailing Address Highway 43

City Eight Mile State AL Zip Code 36613

Purpose of Disbursement LUNCH FOR WORKERS

Candidate Name BURTON R. LEFLORE

Category/
Type

Office Sought: ☒ House
Senate
President

Disbursement For:
Primary General
☒ Other (specify) SPECIAL

State: AL District: 01

Date of Disbursement

3 Dec 2013

Amount of Each Disbursement this Period

35.59

B. SAM'S CLUB

Mailing Address AIRPORT BLVD

City AIRPORT MOBILE State AL Zip Code 36606

Purpose of Disbursement GAS FOR TRUCK TO PUT OUT SIGNS

Candidate Name BURTON R. LEFLORE

Category/
Type

Office Sought: ☒ House
Senate
President

Disbursement For:
Primary General
☒ Other (specify) SPECIAL

State: AL District: 01

Date of Disbursement

3 Dec 2013

Amount of Each Disbursement this Period

80.25

C. EXXON MOBIL

Mailing Address

City MOBILE State AL Zip Code

Purpose of Disbursement GAS FOR CANVASSERS

Candidate Name BURTON R. LEFLORE

Category/
Type

Office Sought: ☒ House
Senate
President

Disbursement For:
Primary General
☒ Other (specify) SPECIAL

State: AL District: 01

Date of Disbursement

5 Dec 2013

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional).....

135.84

TOTAL This Period (last page this line number only).....

8849.75

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE **20** OF **24**

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20b ☐ 19a
20c ☐ 19b
21

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NAME OF COMMITTEE (In Full)

LEFLORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. **CHEVRON**

Date of Disbursement

9 DEC 2013

Mailing Address

City **LOXLEY** State **AL** Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

CANDIDATES TRIP TO RALLY-gas for vehicle

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Disbursement For:

Primary

General

☒ Other (specify)

SPECIAL

State: **AL**

District: **01**

106.01

Full Name (Last, First, Middle Initial)

B. **EXXON MOBIL**

Date of Disbursement

10 DEC 2013

Mailing Address

City **MOBILE** State **AL** Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Gas for CANDIDATE'S VEHICLE

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Disbursement For:

Primary

General

☒ Other (specify)

SPECIAL

State: **AL**

District: **01**

40.00

Full Name (Last, First, Middle Initial)

C. **EXXON MOBIL**

Date of Disbursement

11 DEC 2013

Mailing Address

City **MOBILE** State **AL** Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Gas for Campaign Workers Carpooling

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Disbursement For:

Primary

General

☒ Other (specify)

SPECIAL

State: **AL**

District: **01**

20.00

SUBTOTAL of Disbursements This Page (optional).....

166.01

TOTAL This Period (last page this line number only).....

9015.76

14031184137

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

LEFLORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CAEVON CAS

Date of Disbursement

13 Dec 2013

Mailing Address

City Prichard State AL Zip Code 36610

Amount of Each Disbursement this Period

Purpose of Disbursement Gas for Men Truck Putting up signs

Candidate Name BURTON R. LEFLORE

Category/
Type

Office Sought: ☒ House
Senate
President

Disbursement For:
Primary General
☒ Other (specify) SPECIAL

State: AL District: 01

50.02

Full Name (Last, First, Middle Initial)

B. SAM'S CLUB

Date of Disbursement

13 Dec 2013

Mailing Address AIRPORT BLVD

City MOBILE State AL Zip Code 36606

Amount of Each Disbursement this Period

Purpose of Disbursement Gas for CANDIDATE'S VEHICLE

Candidate Name BURTON R. LEFLORE

Category/
Type

Office Sought: ☒ House
Senate
President

Disbursement For:
Primary General
☒ Other (specify) SPECIAL

State: AL District: 01

13.00

Full Name (Last, First, Middle Initial)

C. MAC'S CAFE

Date of Disbursement

15 Dec 2013

Mailing Address Hwy 43

City LEROY State AL Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement LUNCH CAMPAIGN WORKERS

Candidate Name BURTON R. LEFLORE

Category/
Type

Office Sought: ☒ House
Senate
President

Disbursement For:
Primary General
☒ Other (specify) SPECIAL

State: AL District: 01

14.12

SUBTOTAL of Disbursements This Page (optional).....

137.14

TOTAL This Period (last page this line number only).....

9152.90

14031184138

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

LEFLORE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BP EXPRESS MART #1

Mailing Address

City *FLORA* State *AL* Zip Code

Purpose of Disbursement
OK FOR CANVASSERS VEHICLE

Candidate Name
BURTON R. LEFLORE

Office Sought: ☒ House ☐ Senate ☐ President

Disbursement For: ☒ Primary ☐ General ☒ Other (specify) *SPECIAL*

State: *AL* District: *01*

Date of Disbursement

16 DEC 2013

Amount of Each Disbursement this Period

94.03

B. Full Name (Last, First, Middle Initial)
Barnyard Burger

Mailing Address

City *SARASOTA* State *AL* Zip Code *36580*

Purpose of Disbursement
LUNCH FOR CAMPAIGN WORKERS

Candidate Name
BURTON R. LEFLORE

Office Sought: ☒ House ☐ Senate ☐ President

Disbursement For: ☒ Primary ☐ General ☒ Other (specify) *SPECIAL*

State: *AL* District: *01*

Date of Disbursement

17 DEC 2013

Amount of Each Disbursement this Period

46.16

C. Full Name (Last, First, Middle Initial)
Sam's Club

Mailing Address

City *MOBILE* State *AL* Zip Code

Purpose of Disbursement
OK FOR CANVASSERS VEHICLES

Candidate Name
BURTON R. LEFLORE

Office Sought: ☒ House ☐ Senate ☐ President

Disbursement For: ☒ Primary ☐ General ☒ Other (specify) *SPECIAL*

State: *AL* District: *01*

Date of Disbursement

19 DEC 2013

Amount of Each Disbursement this Period

55.00

SUBTOTAL of Disbursements This Page (optional)

195.19

TOTAL This Period (last page this line number only)

9348.09

14031184139

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (in Full)

LEFLORE FOR CONGRESS

Full Name (Last, First, Middle/Initial)

A.

Walmart

Date of Disbursement

Mailing Address

Halls Mill Road

17 Dec 2013

City

Mobile

State

AL

Zip Code

36619

Purpose of Disbursement

Supplies Food Watch Party

Amount of Each Disbursement this Period

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Senate

President

Disbursement For:

Primary

General

☒ Other (specify)

SPECIAL

State:

AL

District:

01

97.53

Full Name (Last, First, Middle Initial)

B.

DOLLAR TREE

Date of Disbursement

Mailing Address

5451 Halls Mill Road

16 Dec 2013

City

Mobile

State

AL

Zip Code

36619

Purpose of Disbursement

Table Clothes (coverings)

Amount of Each Disbursement this Period

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Senate

President

Disbursement For:

Primary

General

☒ Other (specify)

SPECIAL

State:

AL

District:

01

34.10

Full Name (Last, First, Middle Initial)

C.

Sam's

Date of Disbursement

Mailing Address

AIRPORT BLVD

16 Dec 2013

City

MOBILE

State

AL

Zip Code

36606

Purpose of Disbursement

BEVERAGES - Campaign Watch Party

Amount of Each Disbursement this Period

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Senate

President

Disbursement For:

Primary

General

☒ Other (specify)

SPECIAL

State:

AL

District:

01

58.43

SUBTOTAL of Disbursements This Page (optional).....

190.06

TOTAL This Period (last page this line number only).....

9538.15

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 24 OF 24

☒ 17 20a ☐ 18 20b ☐ 19a 20c ☐ 19b 21

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NAME OF COMMITTEE (In Full)

LEFLORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A.

LOGAN S

Date of Disbursement

Mailing Address

AIRPORT BLVD

18 DEC 2014

City

MOBILE

State

AL

Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

LUNCHEON MEETING FOR CANDIDATE

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Disbursement For:

Primary

General

Senate

☒ Other (specify)

SPECIAL

President

State:

AL

District:

01

28.57

Full Name (Last, First, Middle Initial)

B.

EXXON MOBIL

Date of Disbursement

Mailing Address

18 DEC 2013

City

MOBILE

State

AL

Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

GAS FOR CANDIDATE'S VEHICLES

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Disbursement For:

Primary

General

Senate

☒ Other (specify)

SPECIAL

President

State:

AL

District:

01

45.02

Full Name (Last, First, Middle Initial)

C.

PNC BANK

Date of Disbursement

Mailing Address

Springhill Avenue

31 DEC 2013

City

MOBILE

State

AL

Zip Code

36617

Amount of Each Disbursement this Period

Purpose of Disbursement

BANK SERVICE CHARGE FEES

Candidate Name

BURTON R. LEFLORE

Category/
Type

Office Sought:

☒ House

Disbursement For:

Primary

General

Senate

☒ Other (specify)

SPECIAL

President

State:

AL

District:

01

288.00

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

361.59
9899.74

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

PAGE 1 OF 1

FOR LINE NUMBER:
(check only one)

☒ 9
☐ 10

NAME OF COMMITTEE (In Full)

LeFlore for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Delchamps Printing Co. Inc.

Mailing Address

310 SAINT MICHAEL STREET

City

State

Zip Code

MOBILE AL 36601

Nature of Debt (Purpose):

*PRINT
CAMPAIGN
LITERATURE*

Outstanding Balance Beginning This Period

386.10

Amount Incurred This Period

1961.10

Payment This Period

1441.10

Outstanding Balance at Close of This Period

920.10

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

TURN TECHNICAL SERVICE, INC

Mailing Address

6417 GASLIGHT LANE, NORTH

City

State

Zip Code

MOBILE AL 36695

Nature of Debt (Purpose):

*WEB-SITE
FOR CAMPAIGN*

Outstanding Balance Beginning This Period

500.00

Amount Incurred This Period

200.00

Payment This Period

200.00

Outstanding Balance at Close of This Period

500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ABC SIGNS

Mailing Address

5851 HARVE STEINER ROAD

City

State

Zip Code

MOBILE AL 36682

Nature of Debt (Purpose):

*SIGNS FOR
CAMPAIGN*

Outstanding Balance Beginning This Period

2195.45

Amount Incurred This Period

1079.97

Payment This Period

Outstanding Balance at Close of This Period

1875.42

1) SUBTOTALS This Period This Page (optional) ▶

3295.42

2) TOTALS This Period (last page this line number only) ▶

3295.42

.00

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶

3295.42

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

14031184142

SCHEDULE C-1 (FEC Form 3)

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Federal Election Commission, Washington, D.C. 20463

Supplementary for
Information found on
Page 1 of Schedule C

NAME OF COMMITTEE (In Full) LEFLORE FOR CONGRESS	FEC IDENTIFICATION NUMBER C 00546366
--	--

LENDING INSTITUTION (LENDER) Full Name NA	Amount of Loan , , .	Interest Rate (APR) %
Mailing Address	Date Incurred or Established M M / D D / Y Y Y Y	
City State Zip Code	Date Due M M / D D / Y Y Y Y	

A. Has loan been restructured? ☐ No ☐ Yes If yes, date originally incurred M M / D D / Y Y Y Y

B. If line of credit, Total Outstanding Balance: , , .00
Amount of this Draw: , , .00

C. Are other parties secondarily liable for the debt incurred?
☐ No ☐ Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?
☐ No ☐ Yes If yes, specify: **NA**
What is the value of this collateral? , , .00
Does the lender have a perfected security interest in it? ☐ No ☐ Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? ☐ No ☐ Yes If yes, specify: **NA**
What is the estimated value? , , .00

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).

Date account established:

M M / D D / Y Y Y Y

Location of account:

Address:

City, State, Zip:

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

G. COMMITTEE TREASURER Typed Name Signature NA	DATE M M / D D / Y Y Y Y
---	-----------------------------

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:
I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.
II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE Typed Name Signature	Title	DATE M M / D D / Y Y Y Y
--	-------	-----------------------------

14031184143

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE / OF

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Letford For Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

N/A

Election:

☐ Primary
☐ General

☒ Other (specify) ▼

SPECIAL

Mailing Address

City

State

ZIP Code

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

.00

.00

.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y M M / D D / Y Y Y Y

% (apr)

☐ Yes

☐ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

N/A

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

N/A

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

N/A

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

N/A

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional)..... ►

.00

TOTALS This Period (last page in this line only)..... ►

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

FEC FORM 3Z (File with Form 3)

CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS

(To Be Used By A Principal Campaign Committee)

Name of Principal Campaign Committee (In Full)		Report Covering Period:	
LEFLORE FOR CONGRESS		From:	To:
		11 28 2013	12 31 2013
Committee Name		(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees
A	LEFLORE FOR CONGRESS	8781.10	00
B	Column Total Last Page Only.....	21362.66	00
	(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions
A	00	00	8781.10
B	00	00	21362.66
	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans
A	00	00	00
B	00	00	00
	(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts
A	00	00	00
B	00	00	00
	(l) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees
A	8781.10	9899.74	00
B	21362.66	21176.88	00
	(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Can- didate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments
A	00	00	00
B	00	00	00
	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committees
A	00	00	00
B	00	00	00
	(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements
A	00	00	9899.74
B	00	00	21176.88
	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligations Owed TO the Committee
A	1304.42	185.78	00
B			
	(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures
A		8781.10	9899.74
B		21362.66	21176.81

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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
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<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> USPS Priority Mail	Postmarked
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<input type="checkbox"/> USPS Priority Mail Express	Postmarked
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<input type="checkbox"/> Postmark Illegible	
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<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>FEDEX</i>	Shipping Date <i>2/11/14</i>	
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<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
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[Signature]
PREPARER
(8/2013)

2/18/14
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